

**City of Taunton
Tennis 2016
Registration Form**



Name: _____ Home Phone: _____

Address: _____ Age: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____

Parent/Guardian Information:

Mother's Name: _____ Phone: _____

Father's Name: _____ Phone: _____

Emergency Name in the event a parent cannot be reached:

Name: _____ Phone Number: _____

Physician Name: _____ Phone Number: _____

Please check selection below

Lessons are for one hour. There are four students per instructor.

Cost is \$60.00 per student.

Tuesday **5:00 PM – 6:00 PM** _____

6:00 PM - 7:00 PM _____

I, the undersigned parent/legal guardian of _____ do hereby consent to his/her participating in recreational programs and do forever RELEASE, acquit, discharge, and covenant to hold harmless the City of Taunton from any and all actions, causes of action, [and] claims on account of, or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damage which I may now or hereafter have as the parent/legal guardian of said minor, and also all claims or right of action for damages which said minor has or hereafter may acquire, either before or after he/she has reached his/her majority resulting from his/her participating in the City of Taunton's Tennis Program.

Date: _____

Parent or Legal Guardian

ck# _____ amt. _____